

Bringing Healt

Story and Photos by SSG Len Butler



Texas Army National Guard Dr. (MAJ) Matthew Williams works on one of the thousands of patients who sought dental care during Operation Lone Star 2000.

T'S the end of summer, and Diana Zepeda sits outside John F. Kennedy Middle School in Hildalgo County, Texas, trying to keep watch over her daughters, Diana, 7, and Karrie, 5, as they play "tag" with other children.

It's 6:30 a.m.

As the sun peers over the horizon, it reveals an ever-growing line of people.

Another two hours go by before the school doors open. But instead of teachers and principals, men and women in BDUs spill out, ready to lend a helping hand.

Zepeda was just one of about 5,600 people who lined up as early as 3 a.m. nearly every day for two weeks last summer. They were seeking free health care from Operation Lone Star 2000, a Marine Forces Reserve-sponsored civil-military Innovative Readiness Training project. The exercise offered free medical and dental care to under-served people here at three area schools.

Healthcare providers from the Texas Army National Guard and Navy corpsmen from the Marine Forces Reserve 4th Fleet Services Support Group were the other military contributors to the mission. Members of the U.S. Public Health Service, the

Disaster Medical Assistance Team of the Federal Emergency Management Agency and the Texas Department of Health provided additional support.

"I work for an electronics company, and right now I don't have any insurance," Zepeda said, explaining why her family was in line that morning. "With the money I spend on rent and food, even a couple of dollars makes a difference."

Operation Lone Star 2000 was just one of the more than 210 IRT missions successfully completed last year, in nearly every state.

The care the medics and corpsmen provided during Lone Star 2000 was basic. Cmdr. Don A. Hatfield, a dentist with the 4th FSSG, said there are certain limitations on the type of care the patients receive, which stem from the soldiers' and the sailors' missions.

"We are set up as field medical and dental units," Hatfield said. "In my



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Dr. (MAJ) Marco Coppola, a member of the Texas Guard's Detachment 5, State Area Command, examines Ruby Matamoros.





SGT Jose Hernandez, a medic from the Texas Guard's 3rd Battalion, 141st Infantry, takes a blood-pressure reading as part of the patient-screening process.

case, when the marines deploy, we go with them and set up our operations in potentially austere locations. We cannot provide the type of care that requires the use of laboratories."

LTC Richard Sanchez, from the Texas Guard's Detachment 5, State

Area Command, said this doesn't mean the field medical units lack the expertise. On the contrary, he said, logistics create the limitations, not the people.

"As long as we have the equipment, our people are trained to do the job," Sanchez said. "Our people have the

HM2 Randy Peters, a Navy corpsman from the Marine Reserve's 4th Fleet Services Support Group, gives one of 6,700 immunizations provided during Lone Star 2000.

training to do almost anything in the field as they would in a normal hospital setting."

That's just fine with Rosa Cantu. Her daughter, Anna, received her booster shots just in time to start kindergarten. Cantu said it's one less thing she has to worry about when Anna goes to class.

Services at medical IRT's typically include medical and dental care, a pharmacy for refilling or making prescriptions, stress and diabetes testing, and immunizations for anyone from infants to adults.

Since the 1980s the U.S. military
— and the reserve component in
particular — has been conducting
humanitarian missions in Central and
South America.

Now however, the active component has joined its Guard and Reserve counterparts. Together, they are offering their military skills to fellow

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Americans here at home.

For Rio Grande Valley residents such as SPC Richard Silva and SGT Jose Hernandez, both medics from 3rd Battalion, 141st Infantry, based in Weslaco, it means serving their neighbors and friends.

"I love my city and where I'm from," Silva said. "Heck, I took two weeks vacation just so I could be a part of this."

Hernandez agreed, saying Lone Star is a true example of neighbors serving neighbors.

"This is a great opportunity for the Texas National Guard, as well as the other organizations involved, to give something back to the people and the communities we serve," he said. "The treatment sites are set up extremely well, and we've had a really good turnout."

Turnout sometimes can be too good. Many would-be dental patients last summer had to be turned away because services could not meet the demand. With just a handful of dentists, more than 7,500 dental procedures were performed.

Dr. Brian Smith, the Texas Department of Health's South Texas regional director, said he is emphasizing the need for more dentists this year.

"Our objective is to treat everyone who walks through the door," he said.

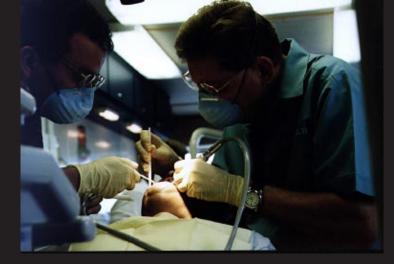
The Lone Star program also has seen a substantial increase in the number of patients receiving immunizations. More than 6,700 patients were vaccinated last year, compared to 3,519 in 1999, the first year Lone Star teams visited this region of Texas.

SSG Judith A. Green of Detachment 5, State Area Command, said her experience in helping the less fortunate has been a rewarding one.

"This is a great opportunity for the people here to get the medical care that everyone should be entitled to, but that they normally couldn't afford," she said.

Hernandez, who left his Weslaco unit shortly after Lone Star 2000 ended, said it was important to him to finish his time there by helping his neighbors.

"I feel very proud to be a part of this," he said. "I'm making plans to go on active duty, and I already have my letter of release from my Guard unit. But I wanted to give back to the community I grew up in."



Innovative Readiness Training: Rebuilding America

CIVIL-Military Innovative Readiness Training programs, such as Operation Lone Star, serve a dual purpose. While military personnel are getting "real world" training that pertains to their military missions, they are also providing a valuable "leave behind" for the community, defense officials say.

All of the military services, including the Coast Guard, participate

in civil-military IRT exercises.

The exercises — which are partnerships between the military and local civil authorities — most often include combat-support and combat-service-support units and focus on healthcare, transportation and engineering needs. While Guard and Reserve units have historically taken the lion's share of these missions, more active-component units are integrating IRT projects into their training plans.

In fiscal year 1999 more than 210 IRT projects were completed across the country. Projects included road and bridge building, air and land transport, children's at-risk programs and medical missions such

as Lone Star.

Air Force Col. Diana Fleek of the Office of the Assistant Secretary of Defense for Reserve Affairs explained that the majority of IRT exercises are funded by the Department of Defense, but that the program is expanding as more units participate.

"We have 150 projects scheduled for 2001 that will receive some funding," Fleek said. "What that number doesn't include is the number of projects that are being funded by other means, such as a unit's

annual-training budget."

Fleek said that communities slated for IRT projects commonly share the costs of the missions, whether through actual monetary funding or providing additional manpower or supplies.

During Operation Lone Star 2000, for example, the Texas Department of Health provided \$22,963 in vaccines, with an additional

\$75,435 in vaccines coming from Hidalgo County.

Despite the often-significant benefit IRT projects provide communities, the purpose of the program is to provide realistic training for military units. Proposed projects come from local and state government agencies, community leaders and nongovernmental agencies.

Individuals or organizations requesting DOD assistance must certify that the services will not compete with local commercial enterprises, and unit commanders must certify that the proposed projects meet their units' training requirements.

"People see that this is hard-core, real-life training," Fleek said. "It is a side effect that offers an additional benefit to the communities."

For more on IRT requirements and the approval process, visit http://raweb.osd.mil/initiatives/IRT.htm. — SSG Len Butler